

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2006 calendar year, or tax year beginning **JUL 1, 2006** and ending **JUN 30, 2007**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	C Name of organization CHILDREN'S HOME & AID SOCIETY OF ILL.	D Employer identification number 36-2167743
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 125 S. WACKER DR., 14TH FLOOR	E Telephone number (312) 424-0200
		City or town, state or country, and ZIP + 4 CHICAGO, IL 60606	F Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Website: ▶ **HTTP://WWW.CHASI.ORG**

J Organization type (check only one) ▶ 501(c) (**3**) ◀ (insert no) 4947(a)(1) or 527

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **45,963,295.**

H and **I** are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes," enter number of affiliates ▶ **N/A**

H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list.)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

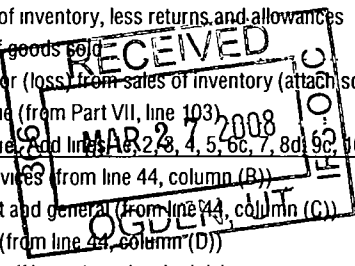
I Group Exemption Number ▶ **N/A**

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue		Expenses		Net Assets	
1	Contributions, gifts, grants, and similar amounts received:				
a	Contributions to donor advised funds	1a			
b	Direct public support (not included on line 1a)	1b	4,217,720.		
c	Indirect public support (not included on line 1a)	1c			
d	Government contributions (grants) (not included on line 1a)	1d			
e	Total (add lines 1a through 1d) (cash \$ 4,217,720. noncash \$ _____)	1e		4,217,720.	
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		37,327,146.	
3	Membership dues and assessments	3		4,845.	
4	Interest on savings and temporary cash investments	4		80,111.	
5	Dividends and interest from securities	5			
6 a	Gross rents	6a			
b	Less: rental expenses	6b			
c	Net rental income or (loss). Subtract line 6b from line 6a	6c			
7	Other investment income (describe ▶ _____)	7			
8 a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other		
		3,095,501.	8a		
b	Less: cost or other basis and sales expenses	2,706,091.	8b		
c	Gain or (loss) (attach schedule)	389,410.	8c		
d	Net gain or (loss). Combine line 8c, columns (A) and (B)	STMT 1		8d	389,410.
9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
a	Gross revenue (not including \$ 0. of contributions reported on line 1b)	9a	636,243.		
b	Less: direct expenses other than fundraising expenses	9b	141,240.		
c	Net income or (loss) from special events. Subtract line 9b from line 9a	SEE STATEMENT 2		9c	495,003.
10 a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a			10c	
11	Other revenue (from Part VII, line 103)			11	601,729.
12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11			12	43,115,964.
13	Program services (from line 44, column (B))			13	37,559,435.
14	Management and general (from line 44, column (C))			14	4,354,759.
15	Fundraising (from line 44, column (D))			15	1,425,297.
16	Payments to affiliates (attach schedule)			16	
17	Total expenses. Add lines 16 and 44, column (A)			17	43,339,491.
18	Excess or (deficit) for the year. Subtract line 17 from line 12			18	-223,527.
19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	8,841,722.
20	Other changes in net assets or fund balances (attach explanation)	SEE STATEMENT 3		20	106,482.
21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20			21	8,724,677.

SCANNED APR 15 2008



Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash \$ 0 . noncash \$ 0 . If this amount includes foreign grants, check here <input type="checkbox"/> 22a				
22b Other grants and allocations (attach schedule) (cash \$ 0 . noncash \$ 0 . If this amount includes foreign grants, check here <input type="checkbox"/> 22b				
23 Specific assistance to individuals (attach schedule) STATEMENT 5 23	4,537,515.	4,537,515.		
24 Benefits paid to or for members (attach schedule) 24				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A 25a	966,491.	850,512.	115,979.	0.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B 25b	0.	0.	0.	0.
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 25c				
26 Salaries and wages of employees not included on lines 25a, b, and c 26	18,946,204.	16,043,942.	2,273,544.	628,718.
27 Pension plan contributions not included on lines 25a, b, and c 27				
28 Employee benefits not included on lines 25a - 27 28	3,583,442.	3,039,829.	430,013.	113,600.
29 Payroll taxes 29	1,437,698.	1,219,955.	172,524.	45,219.
30 Professional fundraising fees 30				
31 Accounting fees 31				
32 Legal fees 32				
33 Supplies 33	1,312,079.	1,132,721.	157,449.	21,909.
34 Telephone 34	486,012.	407,753.	58,321.	19,938.
35 Postage and shipping 35	109,338.	79,340.	13,121.	16,877.
36 Occupancy 36	1,680,327.	1,409,573.	201,639.	69,115.
37 Equipment rental and maintenance 37	259,201.	224,235.	31,104.	3,862.
38 Printing and publications 38	492,883.	409,799.	59,146.	23,938.
39 Travel 39				
40 Conferences, conventions, and meetings 40	195,819.	136,783.	23,498.	35,538.
41 Interest 41	8,588.	7,557.	1,031.	
42 Depreciation, depletion, etc (attach schedule) 42	485,222.	423,468.	58,227.	3,527.
43 Other expenses not covered above (itemize) a _____ 43a b _____ 43b c _____ 43c d _____ 43d e _____ 43e f _____ 43f g SEE STATEMENT 4 43g	8,838,672.	7,636,453.	759,163.	443,056.
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15) 44	43,339,491.	37,559,435.	4,354,759.	1,425,297.

Joint Costs. Check if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;

(iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

Part III Statement of Program Service Accomplishments (See the instructions)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► SEE STATEMENT 6	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)	
a THE CHILDREN'S HOME AND AID SOCIETY OF ILLINOIS PROVIDES PROGRAMS AND SERVICES TO PROMOTE SOCIAL, EMOTIONAL, ENVIRONMENTAL AND DEVELOPMENTAL HEALTH AND GROWTH. THE CORE SERVICES PROVIDED BY THE SOCIETY DURING THE YEAR INCLUDED: ADOPTION, FOSTER CARE, RESIDENTIAL CARE, CHILD CARE AND CHILD AND FAMILY COUNSELING.	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	37,559,435.
b 	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
c 	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
d 	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	37,559,435.

Form 990 (2006)

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year	(B) End of year
Assets	45 Cash - non-interest-bearing	-221,496.	45 -105,428.
	46 Savings and temporary cash investments	4,968,896.	46 1,083,729.
	47 a Accounts receivable	47a 3,271,671.	
	b Less: allowance for doubtful accounts	47b 88,485.	47c 3,183,186.
	48 a Pledges receivable	48a 78,890.	
	b Less: allowance for doubtful accounts	48b	48c 78,890.
	49 Grants receivable	1,094,030.	49
	50 a Receivables from current and former officers, directors, trustees, and key employees		50a
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		50b
	51 a Other notes and loans receivable	51a	
	b Less: allowance for doubtful accounts	51b	51c
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges	237,185.	53 243,086.
	54 a Investments - publicly-traded securities STMT 8 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	3,699,320.	54a 3,843,123.
	b Investments - other securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b
55 a Investments - land, buildings, and equipment: basis STMT 7	55a		
b Less: accumulated depreciation	55b	55c	
56 Investments - other SEE STATEMENT 9	1,076,920.	56 1,186,872.	
57 a Land, buildings, and equipment: basis	57a 20,033,010.		
b Less: accumulated depreciation	57b 8,379,332.	57c 11,653,678.	
58 Other assets, including program-related investments (describe <input checked="" type="checkbox"/> INTEREST RECEIVABLE)		58 33,039.	
59 Total assets (must equal line 74) Add lines 45 through 58	20,953,273.	59 21,200,175.	
Liabilities	60 Accounts payable and accrued expenses	4,880,757.	60 4,864,309.
	61 Grants payable		61
	62 Deferred revenue		62
	63 Loans from officers, directors, trustees, and key employees		63
	64 a Tax-exempt bond liabilities		64a
	b Mortgages and other notes payable	6,386,858.	64b 6,291,246.
	65 Other liabilities (describe <input checked="" type="checkbox"/> SEE STATEMENT 10)	843,936.	65 1,319,943.
66 Total liabilities. Add lines 60 through 65	12,111,551.	66 12,475,498.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
	67 Unrestricted	-678,952.	67 3,094,904.
	68 Temporarily restricted	4,363,069.	68 499,853.
	69 Permanently restricted	5,157,605.	69 5,129,920.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.		
	70 Capital stock, trust principal, or current funds		70
	71 Paid-in or capital surplus, or land, building, and equipment fund		71
	72 Retained earnings, endowment, accumulated income, or other funds		72
	73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	8,841,722.	73 8,724,677.
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73	20,953,273.	74 21,200,175.

Part VI Other Information (continued)		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III)		
	82b		N/A
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	84b		N/A
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		
	85a		N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
	85b		N/A
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
c	Dues, assessments, and similar amounts from members		
	85c		N/A
d	Section 162(e) lobbying and political expenditures		
	85d		N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
	85e		N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		
	85f		N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
	85g		N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
	85h		N/A
86	501(c)(7) organizations. Enter. a Initiation fees and capital contributions included on line 12		
	86a		N/A
b	Gross receipts, included on line 12, for public use of club facilities		
	86b		N/A
87	501(c)(12) organizations. Enter. a Gross income from members or shareholders		
	87a		N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them)		
	87b		N/A
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI		X
89 a	501(c)(3) organizations. Enter. Amount of tax imposed on the organization during the year under section 4911 <u>0.</u> ; section 4912 <u>0.</u> ; section 4955 <u>0.</u>		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
c	Enter. Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <u>0.</u>		
d	Enter. Amount of tax on line 89c, above, reimbursed by the organization <u>0.</u>		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
89g			
90 a	List the states with which a copy of this return is filed <u>IL</u>		
b	Number of employees employed in the pay period that includes March 12, 2006	90b	756
91 a	The books are in care of <u>KENT SUAREZ</u> Telephone no. <u>(312) 424-6865</u> Located at <u>125 S. WACKER DRIVE, 14TH FLOOR, CHICAGO, IL</u> ZIP + 4 <u>60606</u>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country <u>N/A</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	91b	X

Part VI Other Information (continued) Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c
 If "Yes," enter the name of the foreign country N/A

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

Part VII Analysis of Income-Producing Activities (See the instructions)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a PROGRAM SERVICE FEES					3,209,840.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					34,117,306.
94 Membership dues and assessments					4,845.
95 Interest on savings and temporary cash investments			14	80,111.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					389,410.
101 Net income or (loss) from special events					495,003.
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a TRAINING FEES			03	26,162.	
b MISCELLANEOUS			03	133,689.	
c PAYMENTS FROM AFFILIATES			03	441,878.	
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		681,840.	38,216,404.
105 Total (add line 104, columns (B), (D), and (E))					38,898,244.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93A	FEES FROM CLIENTS, INSURANCE COMPANIES AND OTHER THIRD PARTY PAYMENTS FOR DIRECT SERVICE RENDERED TO CHILDREN AND THEIR FAMILIES.
93G	GRANT INCOME TO SUBSIDIZE FAMILY AND CHILDRENS PROGRAMS.
94	MEMBERSHIP DUES TO BELONG TO THE WOMEN'S BOARD ORGANIZATION.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13) N/A

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	Yes	No
a	-----					
b	-----					
c	-----					
Totals						

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	Yes	No
a	-----					
b	-----					
c	-----					
Totals						

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Please Sign Here: Kent L. Suarez Signature of officer Date 3/12/08

Type or print name and title: CFO KENT L. SUAREZ, CFO

Paid Preparer's Use Only: Preparer's signature [Signature] Date 3/12/08 Check if self-employed Preparer's SSN or PTIN (See Gen Inst X)

Firm's name (or yours if self-employed), address, and ZIP + 4: CLIFTON GUNDERSON LLP
1301 W. 22ND STREET, SUITE 1100
OAK BROOK, ILLINOIS 60523 EIN Phone no. (630) 573-8600

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2006

Name of the organization: **CHILDREN'S HOME & AID SOCIETY OF ILL.**
Employer identification number: **36 2167743**

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
MEGAN DAVIS-OCHI 125 SOUTH WACKER DRIVE, CHICAGO, IL 6	VP DEVELOPMENT 37.50	98,653.	783.	25,142.
MARY DEBOSE 125 SOUTH WACKER DRIVE, CHICAGO, IL 6	VP PUBLIC POLICY 37.50	75,465.	2,235.	19,199.
HILARY FREEMAN 125 SOUTH WACKER DRIVE, CHICAGO, IL 6	VP QUALITY IMP. 37.50	88,853.	2,632.	22,326.
ANNE BARCLAY 125 SOUTH WACKER DRIVE, CHICAGO, IL 6	AVP METRO REGION 37.50	86,197.	2,388.	26,512.
CYNTHIA PETTY 125 SOUTH WACKER DRIVE, CHICAGO, IL 6	DIRECTOR-RCC 37.50	95,439.	219.	23,473.
Total number of other employees paid over \$50,000 ▶	37			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
SELECT STAFFING CAROL STREAM, IL 60122	TEMPORARY STAFFING SERVICE	338,460.
CHILD SERV 8765 W. HIGGINS ROAD, CHICAGO, IL 60631	SUBCONTRACTOR	303,808.
BABY FOLD P.O. BOX 327, NORMAL, IL 61761	SUBCONTRACTOR	174,119.
LESLIE BATES DAVIS NEIGHBORHOOD 1200 N. 13TH ST., EAST ST. LOUIS, IL	SUBCONTRACTOR	155,419.
MID-AMERICAN BUILDING MAINTENANCE 550 FRONTAGE RD., STE2835, NORTHFIELD, IL 60093	FACILITY CLEANING SERVICES	130,763.
Total number of others receiving over \$50,000 for professional services ▶	13	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
HEALTHCARE SERVICE CORP. P.O. BOX 1186, CHICAGO, IL 60690	MEDICAL INSURANCE	3,072,656.
WALGREENS HEALTH INITIATIVE 22536 NETWORK PLACE, CHICAGO, IL 60673	PRESCRIPTION DRUG BENEFITS	575,829.
FIRST NON PROFIT INSURANCE COMPANY 111 N. CANAL ST., CHICAGO, IL 60690	PROPERTY & CASUALTY INSURANCE	564,438.
METLIFE P.O. BOX 8500, PHILADELPHIA, PA 19178	DENTAL INSURANCE	347,980.
TS 125 S. WACKER JV, L.P. 125 S. WACKER DR., CHICAGO, IL 60606	RENT	311,452.
Total number of other contractors receiving over \$50,000 for other services ▶	5	

Part III Statements About Activities (See page 2 of the instructions.)

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ <u>18,000.</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) VI-B, LINE I Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	X	
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a	Sale, exchange, or leasing of property?		X
b	Lending of money or other extension of credit?		X
c	Furnishing of goods, services, or facilities?		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	X	
e	Transfer of any part of its income or assets?		X
3 a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)		X
b	Did the organization have a section 403(b) annuity plan for its employees?		X
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		X
4 a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g		X
b	Did the organization make any taxable distributions under section 4966?	N/A	
c	Did the organization make a distribution to a donor, donor advisor, or related person?	N/A	
d	Enter the total number of donor advised funds owned at the end of the tax year	▶	0
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	▶	0.
f	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts	▶	0.
g	Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year	▶	0.

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state **▶** _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(v). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total ▶					

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting.
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	5,667,879.	3,990,120.	4,238,183.	3,495,527.	17,391,709.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	34670759.	32597131.	32108762.	35820560.	135197212.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975		70,347.			70,347.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	265,070.	356,458.	SEE STATEMENT 13 323,131.	395,320.	1,339,979.
23 Total of lines 15 through 22	40603708.	37014056.	36670076.	39711407.	153999247.
24 Line 23 minus line 17	5,932,949.	4,416,925.	4,561,314.	3,890,847.	18,802,035.
25 Enter 1% of line 23	406,037.	370,141.	366,701.	397,114.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 376,041.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 896,344.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 18,802,035.
d Add: Amounts from column (e) for lines: 18 70,347. 19 _____ 22 1,339,979. 26b 896,344.					26d 2,306,670.
e Public support (line 26c minus line 26d total)					26e 16,495,365.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 87.7318%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c N/A
d Add: Line 27a total _____ and line 27b total _____					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) 27f N/A					
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

NONE

Part V Private School Questionnaire (See page 9 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
<hr/> <hr/> <hr/>			
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	32d	
<hr/> <hr/>			
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	33h	
<hr/> <hr/>			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.) **N/A**
 (To be completed ONLY by an eligible organization that filed Form 5768)

Check a if the organization belongs to an affiliated group. Check b if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for all electing organizations
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table -		
	If the amount on line 40 is -		
	The lobbying nontaxable amount is -		
	Not over \$500,000		20% of the amount on line 40
	Over \$500,000 but not over \$1,000,000		\$100,000 plus 15% of the excess over \$500,000
	Over \$1,000,000 but not over \$1,500,000		\$175,000 plus 10% of the excess over \$1,000,000
	Over \$1,500,000 but not over \$17,000,000		\$225,000 plus 5% of the excess over \$1,500,000
	Over \$17,000,000		\$1,000,000
41		41	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A (e) Total
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

Part VI-B Lobbying Activity by Nonelecting Public Charities
 (For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body	X		18,000.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (Add lines c through h.)			18,000.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

SEE STATEMENT 14

Children's Home and Aid Society of Illinois, Inc.
June 30, 2007
EIN: 36-2167743

Form 990, Part IV-A and B - Reconciliation of revenue and expense per audited financial statements with revenue and expense per return:

Audited financial statements were prepared on a consolidated basis for the following entities:

CHASI Systems, Inc.
Children's Home and Aid Society of Illinois
Children's Home and Aid Society of Illinois Foundation

Therefore a reconciliation is not being prepared as there are no separate company audited financials.

Children's Home and Aid Society of Illinois, Inc.
June 30, 2007
EIN: 36-2167743

Form 990, Part II, Line 42 - Depreciation Expense:

Depreciation Expense 485,222

Form 990, Part IV, Line 57- Land, building and equipment

	<u>Cost</u>	<u>Acc. Depr.</u>	<u>Net</u>
Land	347,982	-	347,982
Buildings	7,103,024	(3,572,689)	3,530,335
Furniture and Fixtures and Equipment	5,325,813	(4,706,024)	619,789
Automobiles	53,502	(36,209)	17,293
Leasehold Improvements	134,987	(64,410)	70,577
Construction in Progress	<u>7,067,702</u>	<u>-</u>	<u>7,067,702</u>
TOTAL	<u><u>20,033,010</u></u>	<u><u>(8,379,332)</u></u>	<u><u>11,653,678</u></u>

JOHN M. SCOTT CENTER INDUSTRIAL
SCHOOL TRUST

ACCOUNT NO.

DATE	DESCRIPTION	CASH	COST	GAIN/LOSS	SECURITY
12/19/06	ASSETS SOLD/MATURED AIM INTL SMALL COMPANY FUND CL A LONG TERM CAPITAL GAINS DIST AT \$ 2.998 PER SHARE	10,590.42		10,590.42	008879-56-1
12/19/06	SHORT TERM CAPITAL GAINS DIST AT APACHE CORP \$.934 PER SHARE	3,300.65		3,300.65	008879-56-1
10/23/06	SOLD 260 SHS 10/18/06 TO ESI**00100 @ 65.43 COMMISSION: SEC FEE/OTHER COST: 26.00 .53	16,985.27	6,156.98	10,828.29	037411-10-5
03/05/07	SOLD 750 SHS 02/28/07 TO ESI**00100 @ 69.23 COMMISSION: SEC FEE/OTHER COST: 60.00 1.60	51,860.90	17,760.52	34,100.38	037411-10-5
03/19/07	SOLD 250 SHS 03/14/07 TO ESI**00100 @ 67.43 COMMISSION: SEC FEE/OTHER COST: 20.00 .52	16,836.98	5,920.17	10,916.81	037411-10-5
10/23/06	AT&T INC COM SOLD 600 SHS 10/18/06 TO ESI**00100 @ 33.25 COMMISSION: SEC FEE/OTHER COST: 60.00 .62	19,889.38	24,744.75	4,855.37	00206R-10-2
02/16/07	BANK AMER CORP SOLD 400 SHS 02/13/07 TO ESI**00100 @ 53.71 COMMISSION: SEC FEE/OTHER COST: 32.00 .66	21,451.34	21,568.00	116.66	060505-10-4

JOHN M. SCOTT CENTER INDUSTRIAL
SCHOOL TRUST

ACCOUNT NO.

DATE	DESCRIPTION	CASH	COST	GAIN/LOSS	SECURITY
10/23/06	BELLSOUTH CORP SOLD 600 SHS 10/18/06 TO ESI**00100 @ 43.74	26,183.19	27,729.00-	1,545.81-	079860-10-2
	COMMISSION: SEC FEE/OTHER COST: 60.00 .81				
11/20/06	CAMECO CORP COM ISIN# CAL3321L1085 SOLD 1500 SHS 11/15/06 TO ESI**00100 @ 31.7003	47,458.99	57,528.60-	10,069.61-	13321L-10-8
	COMMISSION: SEC FEE/OTHER COST: 90.00 1.46				
01/16/07	CATERPILLAR INC SOLD 700 SHS 01/10/07 TO ESI**00100 @ 60.17	42,061.70	14,021.00-	28,040.70	149123-10-1
	COMMISSION: SEC FEE/OTHER COST: 56.00 1.30				
03/13/07	SOLD 500 SHS 03/08/07 TO ESI**00100 @ 64.25	32,084.01	10,015.00-	22,069.01	149123-10-1
	COMMISSION: SEC FEE/OTHER COST: 40.00 .99				
06/29/07	CITADEL BROADCASTING CORP COM SOLD 117 IN LIEU OF FRACTION SHARES SALE OF FRACTIONAL SHARES	.76	.73-	.03	17285T-10-6
02/09/07	CITIGROUP INC SOLD 1000 SHS 02/06/07 TO ESI**00100 @ 55.24	55,178.30	48,550.00-	6,628.30	172967-10-1
	COMMISSION: SEC FEE/OTHER COST: 60.00 1.70				

JOHN M. SCOTT CENTER INDUSTRIAL
SCHOOL TRUST

ACCOUNT NO.

DATE	DESCRIPTION	CASH	COST	GAIN/LOSS	SECURITY
10/23/06	DEVON ENERGY CORPORATION NEW COM SOLD 250 SHS 10/18/06 TO ESI**00100 @ 66.76 COMMISSION: SEC FEE/OTHER COST: 25.00 SOLD 250 SHS 03/08/07 TO ESI**00100 @ 64.9136 COMMISSION: SEC FEE/OTHER COST: 20.00 PHLMC 6.2504 03/05/12 DTD 03/05/02 CALLABLE 03/05/07 03/05/07 RECD PROCEEDS ON FULL CALL OF 75,000 PAR VALUE FIDELITY ADV DIVERS INTL FUND CL A 12/11/06 LONG TERM CAPITAL GAINS DIST AT \$ 1.279 PER SHARE 12/11/06 SHORT TERM CAPITAL GAINS DIST AT \$.290 PER SHARE 12/12/06 ADDITIONAL LONG-TERM GAINS RECEIVED 12/12/06 RECEIVED 12/12/06 FNMA 05.2504 04/15/07 DTD 03/26/02 04/16/07 RECD PROCEEDS ON MATURITY OF 50,000 PAR VALUE GENERAL ELECTRIC CO 10/23/06 SOLD 1000 SHS 10/18/06 TO ESI**00100 @ 35.82 COMMISSION: SEC FEE/OTHER COST: 60.00	16,664.48	11,352.50-	5,311.98	25179M-10-3
03/11/07	COMMISSION: SEC FEE/OTHER COST: .52 SOLD 250 SHS 03/08/07 TO ESI**00100 @ 64.9136 COMMISSION: SEC FEE/OTHER COST: 20.00 PHLMC 6.2504 03/05/12 DTD 03/05/02 CALLABLE 03/05/07 03/05/07 RECD PROCEEDS ON FULL CALL OF 75,000 PAR VALUE FIDELITY ADV DIVERS INTL FUND CL A 12/11/06 LONG TERM CAPITAL GAINS DIST AT \$ 1.279 PER SHARE 12/11/06 SHORT TERM CAPITAL GAINS DIST AT \$.290 PER SHARE 12/12/06 ADDITIONAL LONG-TERM GAINS RECEIVED 12/12/06 RECEIVED 12/12/06 FNMA 05.2504 04/15/07 DTD 03/26/02 04/16/07 RECD PROCEEDS ON MATURITY OF 50,000 PAR VALUE GENERAL ELECTRIC CO 10/23/06 SOLD 1000 SHS 10/18/06 TO ESI**00100 @ 35.82 COMMISSION: SEC FEE/OTHER COST: 60.00	16,207.90	11,352.50-	4,855.40	25179M-10-3
		75,000.00	74,851.50-	148.50	3134A4-MF-8
		3,851.23		3,851.23	315920-73-6
		873.06		873.06	315920-73-6
		.78		.78	315920-73-6
		.18		.18	315920-73-6
		50,000.00	50,619.50-	619.50-	31359M-MP-5
		35,758.90	2,150.00-	33,608.90	369604-10-3
		60.00			
		1.10			

JOHN M. SCOTT CENTER INDUSTRIAL
SCHOOL TRUST

ACCOUNT NO.

DATE	DESCRIPTION	CASH	COST	GAIN/LOSS	SECURITY
	GILEAD SCIENCES INC				
02/09/07	SOLD 1000 SHS 02/06/07 TO ESI**00100 @ 69.833 COMMISSION: 60.00 SEC FEE/OTHER COST: 2.15	69,770.85	60,460.40-	9,310.45	375558-10-3
	GNMA POOL #434441 DTD 07/01/99				
07/17/06	PRIN PMT FOR JUNE 2006	17.24	17.24-		36207K-S6-8
08/15/06	PRIN PMT FOR JULY 2006	17.34	17.34-		36207K-S6-8
09/15/06	PRIN PMT FOR AUGUST 2006	719.43	719.43-		36207K-S6-8
10/16/06	PRIN PMT FOR SEPTEMBER 2006	1,042.99	1,042.99-		36207K-S6-8
11/15/06	PRIN PMT FOR OCTOBER 2006	14.97	14.97-		36207K-S6-8
12/15/06	PRIN PMT FOR NOVEMBER 2006	15.74	15.74-		36207K-S6-8
01/16/07	PRIN PMT FOR DECEMBER 2006	14.80	14.80-		36207K-S6-8
02/15/07	PRIN PMT FOR JANUARY 2007	15.43	15.43-		36207K-S6-8
03/15/07	PRIN PMT FOR FEBRUARY 2007	15.53	15.53-		36207K-S6-8
04/16/07	PRIN PMT FOR MARCH 2007	16.10	16.10-		36207K-S6-8
05/15/07	PRIN PMT FOR APRIL 2007	15.12	15.12-		36207K-S6-8
06/15/07	PRIN PMT FOR MAY 2007	1,015.93	1,015.93-		36207K-S6-8
06/19/98	DTD				
06/15/07	RECD PROCEEDS ON MATURITY OF 100,000 PAR VALUE	98,570.00	98,570.00-		36233T-AH-2
	HOME DEPOT INC				
08/28/06	SOLD 1000 SHS 08/23/06 TO ESI**00100 @ 33.75 COMMISSION: 60.00 SEC FEE/OTHER COST: 1.04	33,688.96	29,494.70-	4,194.26	437076-10-2
	HUGOTON RTY TR TEX				
10/23/06	SOLD 101 SHS 10/18/06 TO ESI**00100 @ 26.1 COMMISSION: 10.10 SEC FEE/OTHER COST: .08	2,625.92	2,782.56-	156.64-	444717-10-2

JOHN M. SCOTT CENTER INDUSTRIAL
SCHOOL TRUST

ACCOUNT NO.

DATE	DESCRIPTION	CASH	COST	GAIN/LOSS	SECURITY
01/16/07	JOHNSON & JOHNSON SOLD 150 SHS 01/10/07 TO ESI**00100 @ 56.15 COMMISSION: SEC FEE/OTHER COST: 12.00 .31	9,910.19	9,976.50-	66.31-	478160-10-4
02/09/07	MERRILL LYNCH & CO INC SOLD 550 SHS 02/06/07 TO ESI**00100 @ 93.84 COMMISSION: SEC FEE/OTHER COST: 44.00 1.59	51,566.41	38,291.00-	13,275.41	590188-10-8
05/21/07	MORGAN STANLEY CAP TR II PFD 7.25# 07/31/31 SER QUARTLY CALLABLE CALL 7/31/06 @25.00 COMPLETE CALL @ 25.00 MOTOROLA INC SOLD 1500 SHS 01/09/07 TO ESI**00100 @ 18.56 COMMISSION: SEC FEE/OTHER COST: 90.00 .86	50,000.00	53,865.00-	3,865.00-	61747N-10-9
01/12/07	MOTOROLA INC SOLD 1500 SHS 01/09/07 TO ESI**00100 @ 18.56 COMMISSION: SEC FEE/OTHER COST: 90.00 .86	27,749.14	35,370.00-	7,620.86-	620076-10-9
01/16/07	NOKIA CORP SPONSORED ADR SOLD 1000 SHS 01/10/07 TO ESI**00100 @ 19.01 COMMISSION: SEC FEE/OTHER COST: 60.00 .59	18,949.41	18,147.60-	801.81	654902-20-4
02/09/07	PEABODY ENERGY CORP COM SOLD 2000 SHS 02/06/07 TO ESI**00100 @ 41.402 COMMISSION: SEC FEE/OTHER COST: 120.00 2.55	82,681.45	87,760.00-	5,078.55-	704549-10-4

JOHN M. SCOTT CENTER INDUSTRIAL
SCHOOL TRUST

ACCOUNT NO.

DATE	DESCRIPTION	CASH	COST	GAIN/LOSS	SECURITY
03/13/07	PEPBICO INC SOLD 250 SHS 03/08/07 TO ESI**00100 @ 62.79 COMMISSION: SEC FEE/OTHER COST: 20.00 .49	15,677.01	14,930.00-	747.01	7113448-10-8
03/13/07	HELPS DODGE CORP SOLD 250 SHS 03/08/07 TO ESI**00100 @ 125.9418 COMMISSION: SEC FEE/OTHER COST: 20.00 .97	31,464.48	13,530.00-	17,934.48	717265-10-2
03/20/07	SOLD 500 SHS 03/19/07 CASH & STOCK MERGE @ \$88.00 & .67 SHS OF FREEPORT-MCMORAN COPPER & GOLD INC QUALCOMM INC	64,917.40	30,282.00-	34,635.40	717265-10-2
01/16/07	SOLD 1000 SHS 01/10/07 TO ESI**00100 @ 38.19 COMMISSION: SEC FEE/OTHER COST: 60.00 1.18	38,128.82	45,485.00-	7,356.18-	747525-10-3
10/23/06	QUEST DIAGNOSTICS INC SOLD 1200 SHS 10/18/06 TO ESI**00100 @ 49.98 COMMISSION: SEC FEE/OTHER COST: 72.00 1.85	59,902.15	33,154.56-	26,747.59	74834L-10-0
12/22/06	RMK SELECT MID CAP GROWTH FUND CL A LONG TERM CAPITAL GAINS DIST AT \$ 2.281 PER SHARE	6,517.47		6,517.47	75913Q-83-7
12/22/06	SHORT TERM CAPITAL GAINS DIST AT \$.113 PER SHARE	324.89		324.89	75913Q-83-7

JOHN M. SCOTT CENTER INDUSTRIAL
SCHOOL TRUST

ACCOUNT NO.

DATE	DESCRIPTION	CASH	COST	GAIN/LOSS	SECURITY
03/06/07	SCHLUMBERGER LTD ADR SOLD 800 SHS 03/01/07 TO CITIGROUP GLOBAL MARKETS INC @ 63.38 COMMISSION: SEC FEE/OTHER COST: 64.00 1.56	50,638.44	36,164.00-	14,474.44	806857-10-8
07/03/06	TARGET CORP SOLD 750 SHS 06/28/06 TO ESI**00100 @ 48.57 COMMISSION: SEC FEE/OTHER COST: 75.00 1.12	36,351.38	24,585.00-	11,766.38	87612E-10-6
07/15/02	U S INFL IX 3.000% 07/15/12				
10/13/06	SOLD 113267 10/12/06 TO JPMORGAN CHASE BANK/GREENWICH ORIGINAL FACE VALUE 100,000 @ 102.71875	116,346.45	122,662.58-	6,316.13-	912828-AP-7
02/09/07	UNITED TECHNOLOGIES CORP SOLD 800 SHS 02/06/07 TO ESI**00100 @ 68.07 COMMISSION: SEC FEE/OTHER COST: 64.00 1.68	54,390.32	45,293.00-	9,097.32	913017-10-9
03/13/07	V F CORP SOLD 400 SHS 03/08/07 TO ESI**00100 @ 80.48 COMMISSION: SEC FEE/OTHER COST: 32.00 .99	32,159.01	31,016.00-	1,143.01	918204-10-8
10/23/06	VALERO REFNG & MARKETING CO SOLD 1000 SHS 10/18/06 TO ESI**00100 @ 52.58 COMMISSION: SEC FEE/OTHER COST: 60.00 1.62	52,518.38	29,530.00-	22,988.38	91913Y-10-0

ACCOUNT NO. JOHN M. SCOTT CENTER INDUSTRIAL SCHOOL TRUST

DATE	DESCRIPTION	CASH	COST	GAIN/LOSS	SECURITY
10/26/06	SOLD 2000 SHS 10/23/06 TO ESI**00100 @ 51.541	102,958.83	61,638.00-	41,320.83	91913Y-10-0
	COMMISSION: SEC FEE/OTHER COST: WELLS FARGO & CO NEW				
	120.00 3.17				
01/16/07	SOLD 2500 SHS 01/10/07 TO ESI**00100 @ 35.641	88,949.76	61,431.25-	27,518.51	949746-10-1
	COMMISSION: SEC FEE/OTHER COST:				
	150.00 2.74				
03/13/07	SOLD 500 SHS 03/08/07 TO ESI**00100 @ 34.65	17,284.46	14,410.00-	2,874.46	949746-10-1
	COMMISSION: SEC FEE/OTHER COST:				
	40.00 .54				
XTO ENERGY INC COM					
10/23/06	SOLD 200 SHS 10/18/06 TO ESI**00100 @ 44.15	8,817.73	7,916.00-	901.73	98385X-10-6
	COMMISSION: SEC FEE/OTHER COST:				
	12.00 .27				
02/09/07	SOLD 500 SHS 02/06/07 TO ESI**00100 @ 50.1	25,009.23	19,790.00-	5,219.23	98385X-10-6
	COMMISSION: SEC FEE/OTHER COST:				
	40.00 .77				
03/13/07	SOLD 1000 SHS 03/08/07 TO ESI**00100 @ 51.65	51,588.41	41,429.60-	10,158.81	98385X-10-6
	COMMISSION: SEC FEE/OTHER COST:				
	60.00 1.59				
TOTAL ASSETS SOLD/MATURED NET SWEEP SALES		1,844,615.99 /	1,455,206.12-	389,409.87	
GOLDMAN SACHS TREAS OBLIG FUND INSTL 06/30/07 SALES (39) 07/01/06 TO 06/30/07 RMK SELECT MONEY MARKET CL I 06/30/07 SALES (2) 07/01/06 TO 06/30/07 TOTAL NET SWEEP SALES		1,237,700.23	1,237,700.23-		38141W-32-3
		13,184.34	13,184.34-		61741W-83-2
		1,250,884.57	1,250,884.57-	.00	

JOHN M. SCOTT CENTER INDUSTRIAL
SCHOOL TRUST

ACCOUNT NO.

DATE	DESCRIPTION	CASH	COST	GAIN/LOSS	SECURITY
	TOTAL SALES	3,095,500.56 ✓	2,706,090.69 ✓	389,409.87	

FORM 990 GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES STATEMENT 1

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
JOHN M. SCOTT TRUST	3,095,501.	2,706,091.	0.	389,410.
TO FORM 990, PART I, LINE 8	3,095,501.	2,706,091.	0.	389,410.

FORM 990 SPECIAL EVENTS AND ACTIVITIES STATEMENT 2

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
WOMEN'S BOARD BALL	496,683.		496,683.	101051.	395,632.
CHAMPIONS FOR CHILDREN	105,231.		105,231.	30,001.	75,230.
PC&S GOLF OUTING	34,329.		34,329.	10,188.	24,141.
TO FM 990, PART I, LINE 9	636,243.		636,243.	141240.	495,003.

FORM 990 OTHER CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT 3

DESCRIPTION	AMOUNT
UNREALIZED LOSS ON INVESTMENTS	-53,288.
TRANSFERS FROM AFFILIATES	159,770.
TOTAL TO FORM 990, PART I, LINE 20	106,482.

FORM 990 OTHER EXPENSES STATEMENT 4

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
OTHER PROFESSIONAL FEES	2,859,338.	2,324,914.	343,121.	191,303.
LOCAL TRANSPORTATION	932,426.	815,189.	111,891.	5,346.
SUBSCRIPTIONS AND PUBLICATIONS	8,944.	4,154.	1,073.	3,717.
MEMBERSHIP DUES	15,519.	12,367.	1,862.	1,290.
SCHOLARSHIPS	4,773.			4,773.

MISCELLANEOUS EXPENSE	719,037.	396,126.	86,284.	236,627.
MANAGEMENT & GENERAL ALLOCATION	4,298,635.	4,083,703.	214,932.	
TOTAL TO FM 990, LN 43	8,838,672.	7,636,453.	759,163.	443,056.

FORM 990 SPECIFIC ASSISTANCE TO INDIVIDUALS STATEMENT 5

DESCRIPTION	AMOUNT
FOSTER PARENT PAYMENTS - TRANSPORTATION	4,499.
FOSTER PARENT PAYMENTS - BOARD	3,850,499.
FOSTER PARENT PAYMENTS - CLOTHING	642.
FOSTER PARENT PAYMENTS - SPECIAL SERVICE FEES	67,469.
FOSTER PARENT PAYMENTS - OTHER	2,323.
FOSTER PARENT PAYMENTS - MEDICAL	757.
FOSTER PARENT PAYMENTS - RESPITE	47,139.
EMERGENCY ASSISTANCE - RENT	27,074.
EMERGENCY ASSISTANCE - FOOD	2,667.
EMERGENCY ASSISTANCE - TRANSPORTATION	2,327.
EMERGENCY ASSISTANCE - UTILITIES	7,172.
EMERGENCY ASSISTANCE - GENERAL	10,745.
EMERGENCY ASSISTANCE - OTHER	379.
ACTIVITY FEES	46,091.
CAMP FEES	27,871.
MEDICAL TREATMENT	5,977.
CLOTHING	87,783.
EDUCATIONAL TREATMENT	131,309.
PSYCHOLOGICAL TREATMENT	3,121.
LUNCH AND SNACKS	21,631.
TRANSPORTATION - OTHER	71,387.
RESIDENT'S ALLOWANCE	11,810.
PERSONAL NEEDS	18,781.
SPECIFIC ASSISTANCE - OTHER	87,882.
WRAP ASSISTANCE	180.
TOTAL TO FORM 990, PART II, LINE 23	4,537,515.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 6
PART III

EXPLANATION

THE CHILDREN'S HOME AND AID SOCIETY OF ILLINOIS IS A VOLUNTARY NON-PROFIT, NON-SECTARIAN ORGANIZATION WITH PROGRAMS AND SERVICES DESIGNED TO MEET THE NEEDS OF CHILDREN, THEIR FAMILIES, THEIR COMMUNITIES AND TO RESPECT THE DIVERSITY THEY REPRESENT.

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 7

SECURITY DESCRIPTION	COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES
CORPORATE BONDS	FMV		1,386,410.		1,386,410.
STOCKS	FMV	2,349,945.			2,349,945.
TO FORM 990, LINE 54A, COL B		2,349,945.	1,386,410.		3,736,355.

FORM 990 GOVERNMENT SECURITIES STATEMENT 8

DESCRIPTION	COST/FMV	U.S. GOVERNMENT	STATE AND LOCAL GOV'T	TOTAL GOV'T SECURITIES
US TREASURY SECURITIES	FMV	106,768.		106,768.
TOTAL TO FORM 990, LINE 54A, COL B		106,768.		106,768.

FORM 990 OTHER INVESTMENTS STATEMENT 9

DESCRIPTION	VALUATION METHOD	AMOUNT
BENEFICIAL INTEREST IN TRUST	COST	1,186,872.
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		1,186,872.

FORM 990 OTHER LIABILITIES STATEMENT 10

DESCRIPTION	AMOUNT	
INTEREST PAYABLE	19,943.	
LINE OF CREDIT	1,300,000.	
TOTAL TO FORM 990, PART IV, LINE 65, COLUMN B		1,319,943.

 FORM 990 PART V-A - LIST OF CURRENT OFFICERS, DIRECTORS, STATEMENT 11
 TRUSTEES AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
GARY AHLQUIST 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	VICE-CHAIR 0.25	0.	0.	0.
SEAN BLAIR 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
STEVEN BONO 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	CHAIR 0.25	0.	0.	0.
PETER BOROWSKI 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
THOMAS BRAND 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
MAREE BULLOCK 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
KURT COTTIER 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
CECIL COLEMAN 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
LIZ CONNELLY 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
JAMES CRAWFORD III 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
MARLETTA DARNALL 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.

CAMERON FINDLAY 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
MITZI FREIDHEIM 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
DIANE GARONZIK 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
PENNY JOHNSON 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
TRISH KELLY 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
NANCY KEMPF 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
NANCY KOENIG 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
JILL LANDSBERG 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
JUDITH LOCKE 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
WILLIAM LOWRY, JR. 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
RANDALL MEHRBERG 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
THOMAS MURPHY 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	SECRETARY 0.25	0.	0.	0.
NEIL NOVICH 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.

CHILDREN'S HOME & AID SOCIETY OF ILL.

36-2167743

JAMES O'CONNOR, JR. 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
TERENCE ROGERS 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
MATT RUSSOW 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
ALICE SABL 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
CHRIS SEIDMAN 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
MICHAEL SENNETT 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
BEVERLEY SIBBLIES 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
FRANK SMOLA 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
JAMES WAGNER 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
NANCY WIEBOLDT 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	TREASURER 0.25	0.	0.	0.
PAUL WOOD 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
DEBORAH TRASKELL 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	DIRECTOR 0.25	0.	0.	0.
WARREN HEINKE 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	REGIONAL VP 37.50	78,077.	2,314.	20,171.

NANCY B. RONQUILLO 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	CEO 37.50	244,808.	5,542.	61,630.
LONNIE PEARSON 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	SENIOR VP & HR DIRECTOR 37.50	105,846.	3,136.	28,077.
MICHAEL SHAVER 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	COO 37.50	22,617.	0.	6,464.
KENT SUAREZ 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	CFO 37.50	125,252.	3,703.	31,847.
LISA PIEPER 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	REGIONAL VP 37.50	88,936.	2,400.	23,625.
DR. LESLIE INCH 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	REGIONAL VP 37.50	114,443.	3,390.	29,723.
TERRY PEEK 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	REGIONAL VP 37.50	105,849.	3,114.	28,811.
KAREN SELMAN 125 SOUTH WACKER DRIVE CHICAGO, IL 60606	REGIONAL VP 37.50	80,663.	1,210.	21,739.
TOTALS INCLUDED ON FORM 990, PART V-A		966,491.	24,809.	252087.

FORM 990 IDENTIFICATION OF RELATED ORGANIZATIONS STATEMENT 12
PART VI, LINE 80B

NAME OF ORGANIZATION	EXEMPT	NONEXEMPT
CHASI SYSTEMS, INC.	X	
CHILDREN'S HOME AND AID SOCIETY FOUNDATION	X	

SCHEDULE A	OTHER INCOME			STATEMENT 13
DESCRIPTION	2005 AMOUNT	2004 AMOUNT	2003 AMOUNT	2002 AMOUNT
MISCELLANEOUS REVENUE	265,070.	356,458.	323,131.	395,320.
TOTAL TO SCHEDULE A, LINE 22	265,070.	356,458.	323,131.	395,320.

SCHEDULE A

STATEMENT OF LOBBYING ACTIVITIES - PART VI-B

STATEMENT 14

THE INTENTION OF CHILDREN'S HOME AND AID SOCIETY OF ILLINOIS LOBBYING ACTIVITY IS TO EDUCATE ADMINISTRATIVE, LEGISLATIVE AND EXECUTIVE OFFICIALS ABOUT THE NEEDS OF CHILDREN, TO PROMOTE PUBLIC POLICY THAT IS RESPONSIVE TO THE WELL BEING, SAFETY, PREMANCY OF CHILDREN, YOUTH AND FAMILIES.

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box
 - If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

Section 501(c) corporations required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for section 501(c) corporations required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Type or print	Name of Exempt Organization CHILDREN'S HOME & AID SOCIETY OF ILL.	Employer identification number 36-2167743
File by the due date for filing your return See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. 125 S. WACKER DR., 14TH FLOOR	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. CHICAGO, IL 60606	

Internal Revenue Service
RECEIVED

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|-------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 990-E |

NOV 14 2007

Downers Grove, IL

- The books are in the care of ▶ **KENT SUAREZ**
Telephone No. ▶ **(312) 424-6865** FAX No. ▶ **(312) 424-6800**
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a section 501(c) corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2008**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ calendar year _____ or

▶ tax year beginning **JUL 1, 2006**, and ending **JUN 30, 2007**.

2 If this tax year is for less than 12 months, check reason. Initial return Final return Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 4-2007)

- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only Part II and check this box **X**
- Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

Part II: Additional (not automatic) 3-Month Extension of Time. You must file original and one copy.

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization CHILDREN'S HOME & AID SOCIETY OF ILL.	Employer identification number 36-2167743
	Number, street, and room or suite no. If a P.O. box, see Instructions. 125 S. WACKER DR., 14TH FLOOR	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. CHICAGO, IL 60606	

Check type of return to be filed (File a separate application for each return):

- Form 990
 Form 990-EZ
 Form 990-T (sec. 401(a) or 408(a) trust)
 Form 1041-A
 Form 5227
 Form 8870
 Form 990-BL
 Form 990-PF
 Form 990-T (trust other than above)
 Form 4720
 Form 6069

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of **KENT SUAREZ**
Telephone No. **(312) 424-6865** FAX No. **(312) 424-6800**
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **MAY 15, 2008**

5 For calendar year _____, or other tax year beginning **JUL 1, 2006**, and ending **JUN 30, 2007**


6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

7 State in detail why you need the extension
ADDITIONAL TIME IS NEEDED IN ORDER TO GATHER THE PERTINENT INFORMATION REQUIRED TO PREPARE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$ N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature  Title **CHA** Date **2/7/09**

Notice to Applicant. (To Be Completed by the IRS)

- We have approved this application. Please attach this form to the organization's return.
- We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
- We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.
- We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested.
- Other _____

Director _____ By: _____ Date _____

Alternate Mailing Address. Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	Name
	Number and street (include suite, room, or apt. no.) or a P.O. box number
	City or town, province or state, and country (including postal or ZIP code)

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